

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 74

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Kieran Michael Lalor 2008

A.

Full Name (Last, First, Middle Initial)

Mr. Emmett Noonan

Mailing Address 13 Maple St

City

Greenwood Lake

State

NY

Zip Code

10925-2623

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.20038

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Margaret O'Brien

Mailing Address 715 Rte 22

City

Bedford Corners

State

NY

Zip Code

10549

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.20028

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Brigid O'Neill

Mailing Address 669 Alwick Ave

City

West Islip

State

NY

Zip Code

11795-3301

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Housewife

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.19729

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)